Eliminate Tobacco Use Summit 2022

VIRGINIA ACTION PLAN

Name of University: _____

Person Completion Action Plan: _____

Summary of what is needed at my institution to strengthen my campus policy?

SUMMARY OF YOUR PERSONAL AND INSTITUTIONAL ACTIONS, IDEAS AND NEXT STEPS:

New Ideas:

Resources to be shared across our Institution/System/Organization:

Overcoming barriers or challenges:

Opportunities for our institution:

Where can we collaborate efforts with other institutions/groups?

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Ideas for collaborations, grants, or research opportunities?

Who else at my institution needs this information or should be involved?

What are others are planning that may compliment or improve efforts on my campus/in my organization?

What progress would you like to make in your own institution by the next Summit?

NOTES: